

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

10653517

FILING DATE

09-02-03

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2		1				
3						
4		1				
5				1		
6						
7		1				
8						
9		1				
10						
11		1				
12						
13		1				
14						
15		1				
16						
17		1				
18						
19		1				
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21		1				
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23		1				
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25		1				
26						
27		1				
28						
29		1				
30						
31		1				
32						
33		1				
34						
35		1				
36						
37		1				
38						
39		1				
40						
41		1				
42						
43						
44						
45						
46						
47						
48						
49						
50						

TOTAL IND.

2

TOTAL DEP.

39

TOTAL CLAIMS

41

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS